



DEPARTMENT OF PUBLIC SOCIAL SERVICES

WELFARE FRAUD PREVENTION & INVESTIGATIONS SECTION

Number:
04-03

Date:
04/26/2004

ADMINISTRATIVE MEMORANDUM

SUBJECT: REQUEST FOR COMPUTATION

REFERENCE: WFP&I Handbook, Section 22-100

CANCELS: **FILE IN:** WFP&I Handbook, Section 22-100

SPECIAL ATTENTION: WFP&I Staff

PURPOSE

This Administrative Memorandum releases instructions for requesting computation of an overpayment and/or overissuance by the Welfare Fraud Prevention & Investigation (WFP&I) Section's Welfare Fraud Computation Unit. This Administrative Memorandum also releases the WFP&I 88, Request for Computation, revised 04/2004.

POLICY

The Welfare Fraud Investigator (WFI) shall request computation of an overpayment and/or overissuance for the **entire** fraud period for which the WFI has evidence to support a finding that the participant intentionally failed to comply with program regulations (welfare fraud). This includes months for **all or part** of the fraud period when a claim for a Household Participant (HH/P) Error or Agency Error was established by the Eligibility Worker.

The Welfare Computation Clerk (WCC) shall complete the computation following existing procedures. LEADER procedures for establishing a Manual Claim for a Potential Intentional Program Violation (PIPV) have no impact on the WCC's ability to compute an overpayment or overissuance for the entire fraud period.

PROCEDURES

The WFI shall complete the WFP&I 88, Revised 04/2004, attach all required documents needed to compute the overpayment and/or overissuance and submit the computation packet to the Supervising Welfare Fraud Investigator (SWFI) for approval. Following approval by the SWFI, the WFP&I 88, along with all supporting documentation shall be forwarded to the Computation Unit.

Please direct questions regarding this memo to your immediate supervisor.

Luther Evans, Director
Welfare Fraud Prevention & Investigations Section

LE:MH:mh

Attachment

c: Deputy Directors
Chief Clerk

REQUEST FOR COMPUTATION

I. CASE NAME	CASE NUMBER		DIST. NO.	DATE
	LEADER NO.	LEGACY NO. – CD - SF		
PAYEE NAME, If different	FSID NO.	CIN NO.	PAYEE SOCIAL SECURITY NUMBER	

II. COMPUTATION REQUEST FOR: <div style="display: flex; justify-content: space-between;"> CalWORKs <input type="checkbox"/> AFDC General <input type="checkbox"/> Relief Other (Explain) <input type="checkbox"/> _____ </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Food Stamp Benefits <input type="checkbox"/> (Attach DFA 842 LA) Food Stamp Overissuance <input type="checkbox"/> (Attach Usage Information) </div> <div style="margin-top: 10px;"> PA 426 or PA 2110 or Other Computation Completed By District? (Attach copy if Yes) <div style="display: flex; justify-content: flex-end;"> YES <input type="checkbox"/> NO <input type="checkbox"/> </div> </div>	III. FRAUD PERIOD(s) <div style="display: flex; justify-content: space-between;"> Beginning Through </div> <div style="display: flex;"> <div style="flex: 1; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="flex: 1; border-bottom: 1px solid black; margin-bottom: 5px;"></div> </div> <div style="display: flex;"> <div style="flex: 1; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="flex: 1; border-bottom: 1px solid black; margin-bottom: 5px;"></div> </div> <div style="display: flex;"> <div style="flex: 1; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="flex: 1; border-bottom: 1px solid black; margin-bottom: 5px;"></div> </div> <div style="display: flex;"> <div style="flex: 1; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="flex: 1; border-bottom: 1px solid black; margin-bottom: 5px;"></div> </div>
IV. Court Trustee Child Support? <div style="display: flex; justify-content: flex-end;"> YES <input type="checkbox"/> NO <input type="checkbox"/> </div>	

V. ALLEGATION CODE	REASON FOR FRAUD OVERPAYMENT/OVERISSUANCE – READ INSTRUCTION BELOW – SECTION VII.

VI. WAGE EARNER NAME	FSID NO.	NUMBER OF EMPLOYERS (ATTACH EARNINGS RECORDS)

VII. INSTRUCTIONS TO COMPUTATION CLERK	VIII. COMPUTATION UNIT USE ONLY

INVESTIGATOR'S NAME	UNIT NO./FILE NO.	EXTENSION	DATE RECEIVED IN COMPUTATION UNIT
SUPERVISING WELFARE FRAUD INVESTIGATOR APPROVAL/SIGNATURE		APPROVAL DATE	